

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

JACK ORSWELL FOR CONGRESS

ADDRESS (number and street) 316 W FOOTHILL BLVD

Check if different than previously reported. (ACC)

MONROVIA

CA

91016

2. FEC IDENTIFICATION NUMBER ▼

C C00553941

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

CA

27

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY
05 / 19 / 2016 through 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Thomas E Montgomery III

Signature of Treasurer Mr. Thomas E Montgomery III [Electronically Filed] Date

MM / DD / YYYY
07 / 14 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JACK ORSWELL FOR CONGRESS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	11163.00	133944.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	11163.00	133944.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5869.42	76424.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5869.42	76424.21
8. Cash on Hand at Close of Reporting Period (from Line 27).....	98866.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	20000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JACK ORSWELL FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7300.00	119005.00
(ii) Unitemized.....	3863.00	14939.00
(iii) TOTAL of contributions from individuals ▶	11163.00	133944.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11163.00	133944.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	20000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	20000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	1565.38
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11163.00	155509.38

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5869.42	76424.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	750.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	10000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5869.42	87174.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93573.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11163.00
25. SUBTOTAL (add Line 23 and Line 24).....	104736.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5869.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	98866.72

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carol Andreen

Mailing Address 965 Hugo Reid Dr.

City Arcadia State CA Zip Code 91007

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : SA11AI.5869

Amount of Each Receipt this Period
500.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Kevin Baines

Mailing Address 2275 Huntington Dr.

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C**

Name of Employer JPL/Caltech Occupation Research Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2016

Transaction ID : SA11AI.5935

Amount of Each Receipt this Period
100.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Kevin Baines

Mailing Address 2275 Huntington Dr.

City San Marino State CA Zip Code 91108

FEC ID number of contributing federal political committee. **C**

Name of Employer JPL/Caltech Occupation Research Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2016

Transaction ID : SA11AI.5907

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pam Costarella

Mailing Address 1044 Singing Wood Dr

City Arcadia State CA Zip Code 91006

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 13 / 2016

Transaction ID : SA11AI.5916

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Karen Craig

Mailing Address 640 Brightside Lane

City Pasadena State CA Zip Code 91107

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : SA11AI.5892

Amount of Each Receipt this Period
250.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Stephen Cunningham

Mailing Address 2306 Glen Canyon Rd.

City Altadena State CA Zip Code 91001

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : SA11AI.5932

Amount of Each Receipt this Period
500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Beverly Doonan		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2016	
Mailing Address 178 Catherine Park Dr		Transaction ID : SA11AI.5936	
City Glendora	State CA	Amount of Each Receipt this Period _____ 1000.00	
Zip Code 91741		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C _____			
Name of Employer None	Occupation Homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Robert Flores		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 31 / 2016	
Mailing Address 1500 Sierra Madre Villa Ave		Transaction ID : SA11AI.5878	
City Pasadena	State CA	Amount of Each Receipt this Period _____ 250.00	
Zip Code 91107		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C _____			
Name of Employer Seacoast Commerce Bank	Occupation Banker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Lee Gillett		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2016	
Mailing Address 3825 Mayfair Dr		Transaction ID : SA11AI.5920	
City Pasadena	State CA	Amount of Each Receipt this Period _____ 200.00	
Zip Code 91107		<input type="checkbox"/> Memo Item Contribution	
FEC ID number of contributing federal political committee. C _____			
Name of Employer None	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1450.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Virginia Konzelman

Mailing Address 445 Los Altos Ave

City Arcadia State CA Zip Code 91007

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2016

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period
 100.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
David Lehman

Mailing Address 3194 Fairpoint St.

City Pasadena State CA Zip Code 91107

FEC ID number of contributing federal political committee. **C**

Name of Employer Jet Propulsion Labs Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : SA11AI.5934

Amount of Each Receipt this Period
 200.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Stacey Migliori

Mailing Address 3830 Key Bay

City Corona del Mar State CA Zip Code 92625

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2016

Transaction ID : SA11AI.5940

Amount of Each Receipt this Period
 300.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edward Mittleman

Mailing Address 2015 El Vista Ctr

City: Glendale State: CA Zip Code: 91208

FEC ID number of contributing federal political committee: **C**

Name of Employer: N/A Occupation: Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 06 / 30 / 2016

Transaction ID : SA11AI.5924

Amount of Each Receipt this Period: 2500.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Sandra Needs

Mailing Address 1141 S Monterey St

City: Alhambra State: CA Zip Code: 91801

FEC ID number of contributing federal political committee: **C**

Name of Employer: n/a Occupation: n/a

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 05 / 31 / 2016

Transaction ID : SA11AI.5870

Amount of Each Receipt this Period: 50.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Richard Van Kirk

Mailing Address 1550 Rodeo Rd

City: Arcadia State: CA Zip Code: 91006

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 05 / 2016

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period: 250.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2800.00

7300.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 18			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2016
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 47.44
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web ads	<input type="checkbox"/> Memo Item
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 004	Transaction ID : SB17.5971
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) B. Facebook		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2016
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 141.38
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web ads	<input type="checkbox"/> Memo Item
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 004	Transaction ID : SB17.5985
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address 1 Hacker Way		Amount of Each Disbursement this Period 250.09
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Web ads	<input type="checkbox"/> Memo Item
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 004	Transaction ID : SB17.5988
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 27		

SUBTOTAL of Disbursements This Page (optional).....	438.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kelly Paper		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 56 Waverly Dr.		Amount of Each Disbursement this Period 30.71
City Pasadena State CA Zip Code 91105	Purpose of Disbursement Office Supplies 001	
Candidate Name JACK ORSWELL FOR CONGRESS		Memo Item <input type="checkbox"/> Transaction ID : SB17.5983
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Kelly Paper		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 56 Waverly Dr.		Amount of Each Disbursement this Period 43.49
City Pasadena State CA Zip Code 91105	Purpose of Disbursement Office Supplies 001	
Candidate Name JACK ORSWELL FOR CONGRESS		Memo Item <input type="checkbox"/> Transaction ID : SB17.5987
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. LOS ANGELES COUNTY LINCOLN CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address 50 E FOOTHILL BOULEVARD FLOOR 3		Amount of Each Disbursement this Period 500.00
City ARCADIA State CA Zip Code 91006	Purpose of Disbursement Civic Membership 004	
Candidate Name JACK ORSWELL FOR CONGRESS		Memo Item <input type="checkbox"/> Transaction ID : SB17.5964
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	574.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOS ANGELES COUNTY LINCOLN CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2016
Mailing Address 50 E FOOTHILL BOULEVARD FLOOR 3		Amount of Each Disbursement this Period 35.00
City ARCADIA State CA Zip Code 91006	Category/Type 003	
Purpose of Disbursement Event admission	Candidate Name JACK ORSWELL FOR CONGRESS	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5981

Full Name (Last, First, Middle Initial) B. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2016
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 122.00
City Los Angeles State CA Zip Code 90013	Category/Type 004	
Purpose of Disbursement Web Hosting	Candidate Name JACK ORSWELL FOR CONGRESS	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5970

Full Name (Last, First, Middle Initial) c. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 157.00
City Los Angeles State CA Zip Code 90013	Category/Type 004	
Purpose of Disbursement Web Hosting	Candidate Name JACK ORSWELL FOR CONGRESS	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5984

SUBTOTAL of Disbursements This Page (optional).....	314.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 18	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oakland Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2016
Mailing Address 686 S. Arroyo Parkway Suite 24		Amount of Each Disbursement this Period 110.00 <input type="checkbox"/> Memo Item
City Pasadena State CA Zip Code 91105	Purpose of Disbursement Mail List 004 Category/Type	
Candidate Name JACK ORSWELL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5968
State: CA District: 27		

Full Name (Last, First, Middle Initial) B. Oakland Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2016
Mailing Address 686 S. Arroyo Parkway Suite 24		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Pasadena State CA Zip Code 91105	Purpose of Disbursement Campaign Consulting 001 Category/Type	
Candidate Name JACK ORSWELL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5969
State: CA District: 27		

Full Name (Last, First, Middle Initial) c. Occidental Communications Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 1300 Bristol St N		Amount of Each Disbursement this Period 1135.61 <input type="checkbox"/> Memo Item
City Newport Beach State CA Zip Code 92660	Purpose of Disbursement Campaign Consulting 001 Category/Type	
Candidate Name JACK ORSWELL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5927
State: CA District: 27		

SUBTOTAL of Disbursements This Page (optional).....	3245.61
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OSI United States Flags		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2016
Mailing Address 1000 Westinghouse Dr.		Amount of Each Disbursement this Period 243.00 <input type="checkbox"/> Memo Item
City New Stanton	State PA	
Zip Code 15672	Purpose of Disbursement Yard Sign Flags	Transaction ID : SB17.5962
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 27	

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2016
Mailing Address 2111 N. First St.		Amount of Each Disbursement this Period 19.08 <input type="checkbox"/> Memo Item
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17.5951
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 27	

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address 2111 N. First St.		Amount of Each Disbursement this Period 6.50 <input type="checkbox"/> Memo Item
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit Card Fees	Transaction ID : SB17.5952
Candidate Name JACK ORSWELL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 27	

SUBTOTAL of Disbursements This Page (optional).....	268.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2111 N. First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement Credit Card Fees

Candidate Name **JACK ORSWELL FOR CONGRESS**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: CA District: 27

Date of Disbursement: 06 / 05 / 2016

Amount of Each Disbursement this Period: 43.75

Memo Item

Transaction ID : SB17.5953

Category/Type: 003

Full Name (Last, First, Middle Initial)

B. PayPal

Mailing Address 2111 N. First St.

City San Jose State CA Zip Code 95131

Purpose of Disbursement Credit Card Fees

Candidate Name **JACK ORSWELL FOR CONGRESS**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: CA District: 27

Date of Disbursement: 06 / 08 / 2016

Amount of Each Disbursement this Period: 16.73

Memo Item

Transaction ID : SB17.5954

Category/Type: 003

Full Name (Last, First, Middle Initial)

C. PrintRunner

Mailing Address 8000 Haskell Ave

City Van Nuys State CA Zip Code 91406

Purpose of Disbursement Printed flyers

Candidate Name **JACK ORSWELL FOR CONGRESS**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: CA District: 27

Date of Disbursement: 05 / 25 / 2016

Amount of Each Disbursement this Period: 442.58

Memo Item

Transaction ID : SB17.5976

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional)..... 503.06

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 18			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
JACK ORSWELL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement
Mailing Address 41 Wheeler Ave		M M / D D / Y Y Y Y 06 / 01 / 2016
City Arcadia	State CA	Zip Code 91006
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 141.00
Candidate Name JACK ORSWELL FOR CONGRESS		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5986
State: CA District: 27		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement
Mailing Address 41 Wheeler Ave		M M / D D / Y Y Y Y 06 / 02 / 2016
City Arcadia	State CA	Zip Code 91006
Purpose of Disbursement Postage	Category/ Type 003	Amount of Each Disbursement this Period 141.00
Candidate Name JACK ORSWELL FOR CONGRESS		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.5980
State: CA District: 27		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	282.00
TOTAL This Period (last page this line number only).....	5626.36

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5421

JACK ORSWELL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **PERSONAL FUNDS** Memo Item
Mr. JACK E ORSWELL

Election: 2016

Primary
 General
 Other (specify) ▼

Mailing Address
1161 VOLANTE DRIVE

City State ZIP Code
ARCADIA CA 91007

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 04 / D 15 / Y 2015 M M / D D / Y 6/8/2016 Y 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **JACK ORSWELL FOR CONGRESS** Transaction ID : **SC/10.5776**

LOAN SOURCE Full Name (Last, First, Middle Initial) PERSONAL FUNDS <input type="checkbox"/> Memo Item Mr. JACK E ORSWELL	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1161 VOLANTE DRIVE	

City	State	ZIP Code
ARCADIA	CA	91007

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 03 / 31 / 2016	M M / D D / Y Y Y Y 6/8/2016	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="10000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text" value="20000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.